

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P96000071740

1. Entity Name
FC - NORTH 29, INC.



Principal Place of Business

1160 TERMINAL TOWER, 50 PUBLIC SQ
CLEVELAND, OH 44113 US

Mailing Address

1160 TERMINAL TOWER, 50 PUBLIC SQ
CLEVELAND, OH 44113 US

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
04 MAY 11 PM 3:48



05042004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
34-1842235

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

600037064826

05/25/04--01007--003 **150.00
DATE

**FILE NOW!!! FEE IS \$550.00
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	MONCHEIN, ROBERT
STREET ADDRESS	1160 TERMINAL TOWER
CITY - ST - ZIP	CLEVELAND, OH 44113
TITLE	VT
NAME	MILLER, SAMUEL H.
STREET ADDRESS	1160 TERMINAL TOWER
CITY - ST - ZIP	CLEVELAND, OH 44113
TITLE	S
NAME	SMITH, THOMAS G.
STREET ADDRESS	1160 TERMINAL TOWER
CITY - ST - ZIP	CLEVELAND, OH 44113
TITLE	AS
NAME	ORNSTEIN, WARREN K
STREET ADDRESS	1160 TERMINAL TOWER
CITY - ST - ZIP	CLEVELAND, OH 44113
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/6/04
Date

216-621-6060
Daytime Phone #

Thomas G. Smith, Secretary